

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th, Ste. 1A
 Des Moines, Iowa 50319
 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
 Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

Tang
 IA ETHICS AND
 2010 OCT 12 AM 8:4

COMMITTEE NAME (Must be same as on Statement of Organization)

CHERVENY FOR TREASURER

IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
 Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

MARY JO CHERVENY

Political Party (if applicable)

DEMOCRAT

Office Sought

TAMA CO. TREASURER

District (if Senate or House)

FORM
 DR-2

(Rev. 12/2009)

DISCLOSURE
 REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

18694

late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Rebecca & Chyma

SIGNATURE OF PERSON FILING REPORT

(641) 484-3925

TELEPHONE

10-08-10

DATE SIGNED

I AM FILING A

10-19-10

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

TAMA

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

000.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

597.00 ✓

Schedule F: Loans Received total (Attach Schedule F)

235.00 ✓

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$

832.00 ✓

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

784.86 (793.42)

Schedule F: Loan Repayments total (Attach Schedule F)

103.50

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

150.64 (88.5)

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

131.50

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES X NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

CHERVENY FOR TREASURER

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4/14/10	ID# CK# 7845	GARY + BETH LAMB 3829 Q AVENUE CHELSEA IA 52215		\$ 30.00	<input type="checkbox"/>
4/14/10	ID# CK# 3964	TED HALL 1317 THOMAS DRIVE TAMA IA 52339		20.00	<input type="checkbox"/>
4/14/10	ID# CK#	UNITEMIZED CONTRIBUTIONS		60.00	<input type="checkbox"/>
4/23/10	ID# CK# CASH	ANNE MICHAEL 1304 SIEGEL ST TAMA IA 52339		50.00	<input type="checkbox"/>
5/03/10	ID# CK# CASH	LES + MAGGIE PARKS 504 MAPLE ST GARWIN IA 50632		100.00	<input type="checkbox"/>
6/26/10	ID# CK# 6110	JOE LYON 2621 K AVENUE TOLEDO IA 52342		50.00	<input type="checkbox"/>
6/26/10	ID# CK# 5715	JIM ROAN 721 COUNTRY VIEW DR TOLEDO IA 52342		30.00	<input type="checkbox"/>
6/26/10	ID# CK# 2151	SUZANNE WANATEE 1589 305th ST TAMA IA 52339		25.00	<input type="checkbox"/>
8/17/10	ID# CK#	UNITEMIZED CONTRIBUTIONS	9/174	10.00	<input type="checkbox"/>
9/16/10	ID# CK# 1212	TAMA COUNTY DEMOCRATS c/o DORI RAMMELSBURG-DVORAK 114 SHERMAN DYSART, IA 52224		100.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 475.00	✓
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form



SCHEDULE	
A	MONETARY RECEIPTS
(Rev. 07/03)	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
CHERVENY FOR TREASURER

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
9/19/10	ID# CK# 547	EMER CHALUPSKY 537 N. GARDEN EBBERON IA 52225		\$ 50.00	<input type="checkbox"/>
9/19/10	ID# CK#	UNITEMIZED CONTRIBUTIONS		\$22.00	<input type="checkbox"/>
9/19/10	ID# CK# 4903	CLARENCE N. SCHEFFERT 901 PRAIRIE LANE MARSHALLTOWN IA 50158		\$ 50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 122.00	✓
TOTAL (If last page of this schedule)				\$ 597.00	

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE

B

(Rev. 07/03)

MONETARY
EXPENDITURES☐ CHECK THIS BOX IF
AMENDING FORM

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

CHERVENY FOR TREASURER

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3/30/10	ID# CK#	STATE BANK OF TOLEDO 100 E. HIGH ST. TOLEDO IA 52342	check printing charge	\$ 4.82
5/05/10	ID# CK# 2001	MoCo.CREATIVE SERVICES 2650-170TH ST. TRAER IA 50675	services for postcard printing	\$ 249.13
5/24/10	ID# CK# 2002	PAMIDA 1006 S. COUNTY ROAD TOLEDO IA 52342	miscellaneous supplies for Toledo campaign	\$ 42.75
6/26/10	ID# CK# 2003	MARY JO CHERVENY 507 E. STATE TOLEDO IA 52342	repayment for ads in Tama Shopper, Traer Star Clipper, News Herald	\$103.50
7/28/10	ID# CK# cash	LINCOLN FARM BUREAU	cash donation	\$ 25.00
8/10/10	ID# CK#	STATE BANK OF TOLEDO 100 E. HIGH ST. TOLEDO IA 52342	Hometown Account change	\$ 8.56
8/23/10	ID# CK# 2004	U.S. POST OFFICE 200 W. HIGH TOLEDO IA 52342	Two books/ 44¢ stamps	\$ 17.60
9/10/10	ID# CK#	STATE BANK OF TOLEDO 100 E. HIGH ST. TOLEDO IA 52342	Hometown Account change	\$ 8.56
SUB-TOTAL				\$ 451.36
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 2

(for Schedule B)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B

(Rev. 07/03)

MONETARY
EXPENDITURES
☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

CHERVENY FOR TREASURER

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID# CK# 2005	SPEEDY MAGNETS Dave Nunez RIVER BANK, CA	Yardsigns (100) 100 metal stakes	\$190.00
	ID# CK# 2006	Uptown Lounge + Restaurant 422-2nd St. GLADBROOK, IA 50635	5 wrap baskets \$4.50 ea 1 pitcher soda \$5.00	\$40.00
9/23/10	ID# CK# 2007	TAMA NEWS HERALD 220 W. 3rd TAMA IA 52339	Advertising (9/27, 9/30) in local papers	\$103.50
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 333.50
TOTAL (if last page of this schedule)				\$ 784.86

(793.42)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

RESET

SCHEDULE

F

(Rev. 02/08)

**LOANS
RECEIVED
& REPAYED**

COMMITTEE NAME (Must be same as on Statement of Organization)

CHERVENY FOR TREASURER

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 00.00☐ CHECK THIS BOX IF
AMENDING FORM**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
3/18/10	MARY JO CHERVENY 507 STATE ST. TOLEDO IA 52342	CANDIDATE	\$ 150.00
10/3/10	"	"	60.00
10/3/10	"	"	25.00

TOTAL (PART I)

\$ 235.00**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
9/20/10	MARY JO CHERVENY 507 STATE ST. TOLEDO IA 52342	CANDIDATE	\$ 103.50

TOTAL CASH REPAYMENTS (PART II)

\$ 103.50

From Schedule E - TOTAL LOANS FORGIVEN

\$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 131.50

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Page

1 of 1
(for Schedule F)